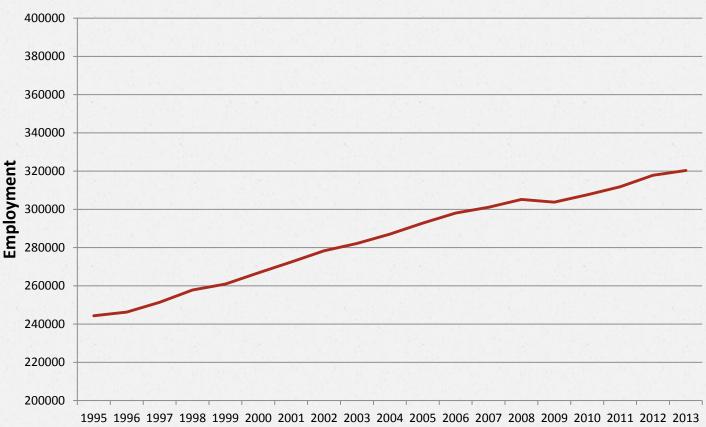


July 7, 2014

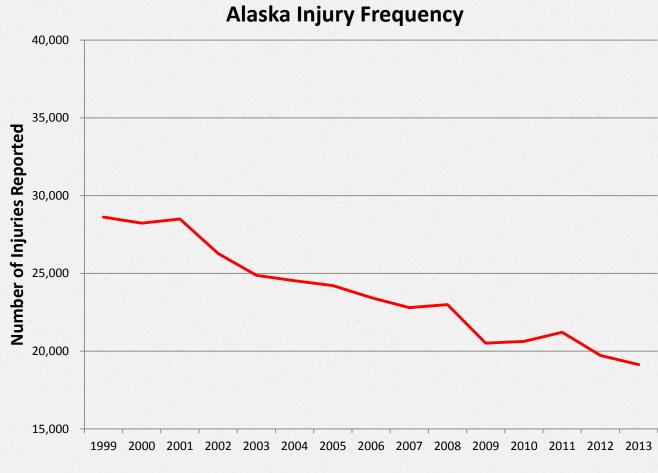


### The Good News....

#### **Employment in Alaska**

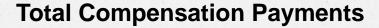


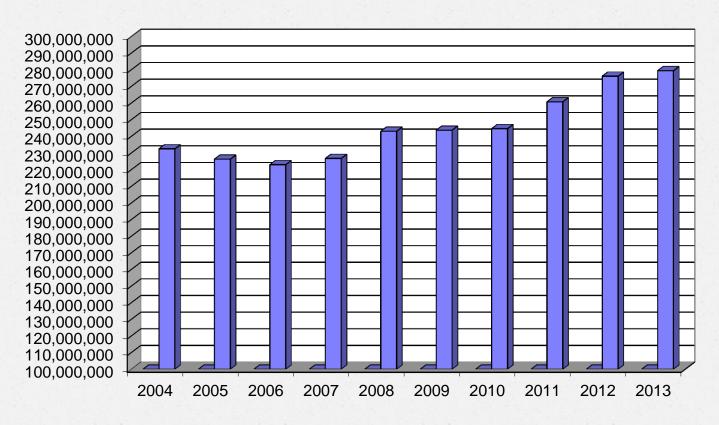
Alaska Department of Labor Research and Analysis



2013 Workers' Compensation Annual Report







2013 Workers' Compensation Annual Report



2012 Ranking	2010 Ranking	State	Index Rate	Percent of study median
1	2	Alaska	3.01	160%
2	6	Connecticut	2.99	159%
3	5	California	2.92	155%
4	3	Illinois	2.83	151%
5	13	New York	2.82	150%
6	4	Oklahoma	2.77	147%
7	7	New Jersey	2.74	146%
8	1	Montana	2.50	133%
9	10	New Hampshire	2.40	128%
10	8	Maine	2.24	119%

Source: 2012 Premium Rate Ranking, State of Oregon, Department of Consumer and Business Services,



- Calendar Year 2000 28<sup>th</sup> in the nation...
- Ocalendar Year 2002 15th in the nation...
- Calendar Year 2004 2<sup>nd</sup> in the nation...
- Calendar Year 2006 1<sup>st</sup> in the nation...
- Calendar Year 2008 1st in the nation...
- Calendar Year 2010 2<sup>nd</sup> in the nation...
- Calendar Year 2012 1<sup>st</sup> in the nation...

#### What's Driving Premium Costs?

## **Cost Drivers**

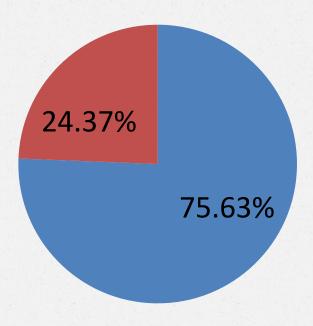
Medical Costs

Indemnity Costs

Legal Costs

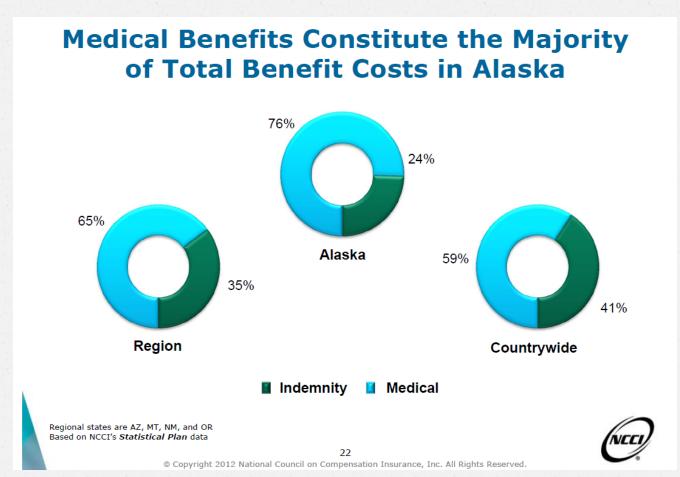
Reemployment Costs





■ Medical Loss Cost Percent ■ Indemnity Loss Cost Percent

2013 Workers' Compensation Annual Report



Source: NCCI 2012 State Advisory Forum



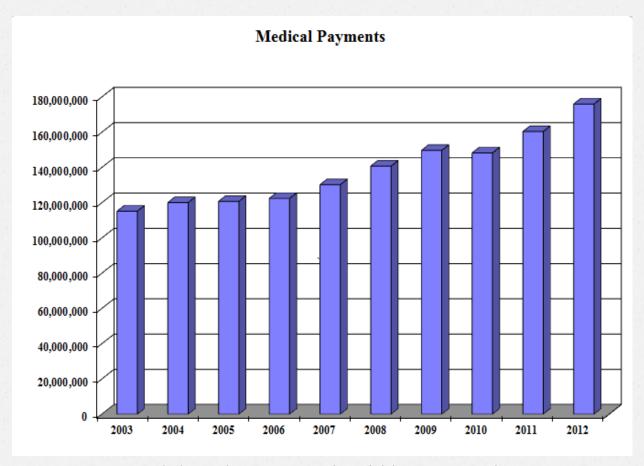
Fees for Services

Utilization

- Prescription Drug Use
  - Use of opioid narcotics
  - Physician Dispensing

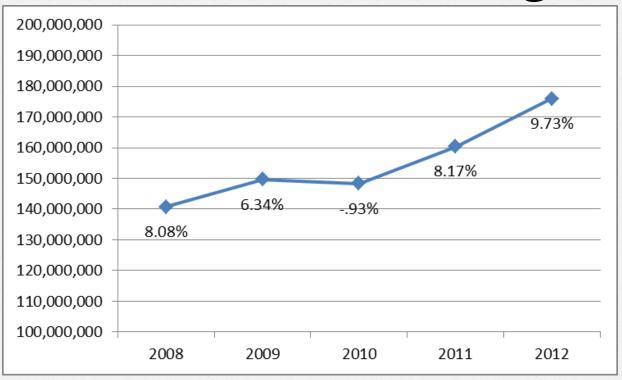
# **Medical Costs**

Fees for Services



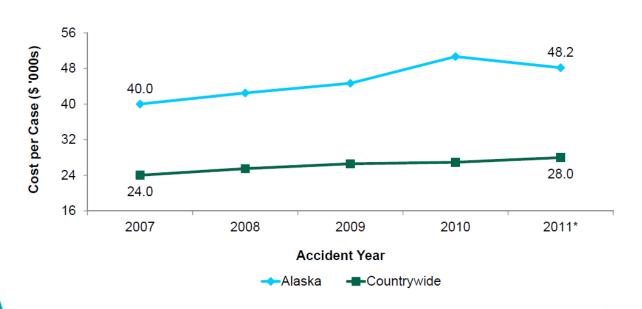
Source: Alaska Workers' Compensation Division 2012 Annual Report





Source: Alaska Workers' Compensation Division 2012 Annual Report

#### Alaska vs. Countrywide Average Medical Claim Severity



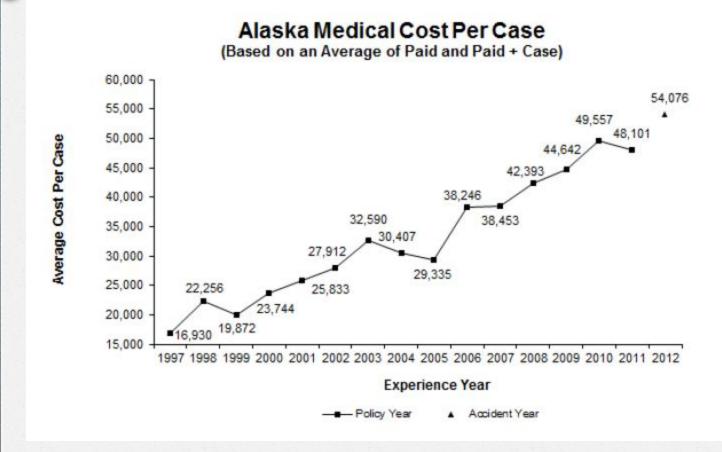
\* Countrywide figure is preliminary Source: NCCI financial data valued as of 12/31/2011

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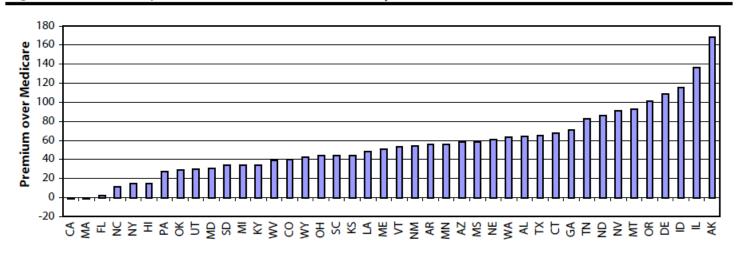
Source: NCCI 2012 State Advisory Forum



Source: NCCI 2014 Rate Filing



Figure 1 Workers' Compensation Premium over Medicare, July 2011



Source: WCRI – Designing Workers' Compensation Medical Fee Schedules – June 2012



**CHANGE FROM 2004 Fee Schedule** 

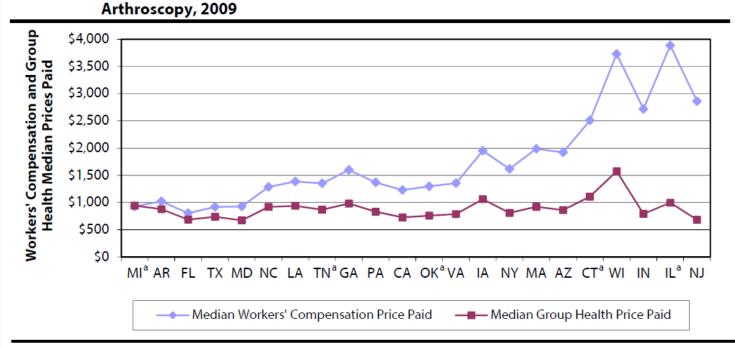
EVALUATION
& MANAGEMENT
SURGERY
RADIOLOGY
PATHOLOGY
DME
16.81%
47.06%
47.06%
24.86%

ANESTHESIOLOGY 13.15% OUTPATIENT 56.43%

**INPATIENT** 120.74%

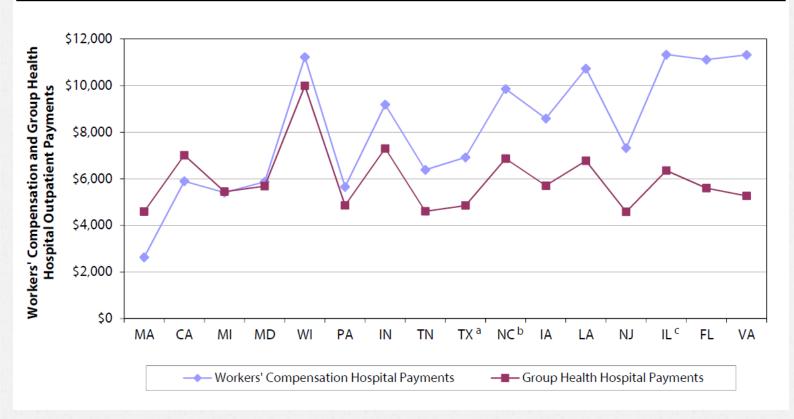
INPATIENT ICU 99.99%





Source: WCRI: A New Benchmark for Workers' Compensation Fee Schedules:
Prices Paid by Commercial Insurers
June 2013

Figure 1a Comparing Workers' Compensation and Group Health Hospital Outpatient Payments for Shoulder Surgical Episodes, 2008

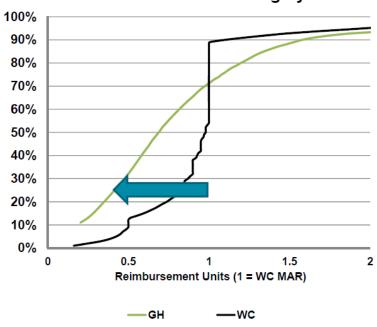


Source: WCRI: Comparing Workers' Compensation and Group Health Hospital Outpatient Payments June 2013

Top 2	5 Surgery Proc	edure Codes Ranked by Paid Amounts for Alask	a (47% of tota	l payments)		
Rank	Procedure	Description	AK WC Fee	Medicare	Washington	AK Average
	Code		Schedule	Fee	WC Fee	Healthcare
1	29881	Arthroscopy Knee w/ Meniscus Repair	\$ 5,158.02	\$ 673.11	\$ 912.56	\$ 2,531.85
2	23412	Repair of Rotator Cuff	\$ 7,725.78	\$ 1,063.39	\$ 1,421.68	\$ 3,980.57
3	29826	Arthroscopy shoulder surgical w/decompres	\$ 5,436.83	\$ 224.46	\$ 288.87	\$ 853.41
4	63030	Laminotomy w/ decompression	\$ 10,391.15	\$ 1,186.95	\$ 1,605.97	\$ 4,450.70
5	29807	Arthroscopy shoulder surgical; labral tear	\$ 6,621.79	\$ 1,292.78	\$ 1,724.95	\$ 4,833.41
6	29888	Arthroscopic ligament repair	\$ 8,782.58	\$ 1,239.28	\$ 1,648.03	\$ 4,637.14
7	64483	Injection anesthetic agent/steroid epidural	\$ 2,364.74	\$ 274.82	\$ 392.91	\$ 1,070.73
8	29880	Arthroscopy knee surgical; with meniscector	\$ 5,576.24	\$ 700.17	\$ 947.42	\$ 2,642.16
9	22551	Arthrodesis anterior interbody; cervical	\$ 13,973.36	\$ 2,113.35	\$ 2,827.87	\$ 7,981.69
10	23430	Tenodesis of tendon	\$ 5,837.26	\$ 931.43	\$ 1,252.34	\$ 3,463.72
11	62311	Injection of diagnostic/therapeutic substance	\$ 1,295.28	\$ 248.65	\$ 371.33	\$ 920.00
12	23120	Claviculectomy; partial	\$ 2,704.02	\$ 722.91	\$ 983.95	\$ 2,679.98
13	22612	Arthrodesis posterior; lumbar	\$ 12,952.83	\$ 1,979.87	\$ 2,635.84	\$ 7,437.21
14	29827	Arthroscopy shoulder surgical w/cuff repair	\$ 7,318.82	\$ 1,346.27	\$ 1,789.14	\$ 5,050.22
15	29877	Arthroscopy w/debridement	\$ 4,879.21	\$ 774.76	\$ 1,045.37	\$ 2,881.03
16	29806	Arthroscopy shoulder surgical; capsulorrhap	\$ 6,970.30	\$ 1,326.86	\$ 1,768.67	\$ 4,964.70
17	49505	Repair initial inguinal hernia	\$ 3,461.14	\$ 655.21	\$ 863.30	\$ 2,430.13
18	64415	Injection anesthetic agent; brachial plexus	\$ 1,182.37	\$ 149.52	\$ 202.54	\$ 576.26
19	64721	Neuroplasty and/or transposition	\$ 5,187.82	\$ 525.08	\$ 724.40	\$ 1,946.17
20	29822	Arthroscopy shoulder surgical; debridement	\$ 4,739.80	\$ 714.19	\$ 965.13	\$ 2,660.81
21	20610	Arthrocentesis aspiration and/or injection	\$ 382.66	\$ 74.60	\$ 100.72	\$ 318.33
22	23420	Reconstruction of complete shoulder	\$ 9,871.83	\$ 1,208.38	\$ 1,616.48	\$ 4,516.47
23	63650	Percutaneous implantation of neurostimula	\$ 6,791.60	\$ 564.80	n/a	\$ 2,082.27
24	12001	Simple repair of superficial wounds	\$ 489.30	\$ 109.18	\$ 154.95	\$ 415.91
25	63042	Laminotomy with decompression	\$ 11,681.55	\$ 1,609.81	\$ 2,154.94	\$ 6,040.11







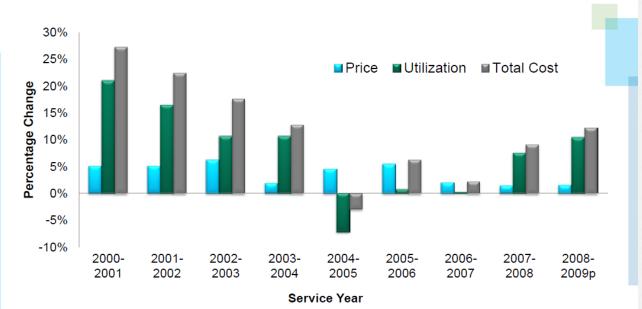
- One-third of WC payments for Surgery are at the MAR
- WC often pays more than GH for comparable surgical services
  - 70% of GH payments for Surgery are below the MAR
  - 25% of surgical services in GH are paid at 55% or more below the MAR

Source: NCCI: Price Impact of Workers Compensation Physician Fee Schedules:
Preliminary Results
Annual Issues Symposium - May 2013

## **Medical Costs**

Utilization





Source: Derived from sample data provided by carriers

Aggregation of states where NCCI provides ratemaking services, excludes WV, plus CA, DE, MA, MI, MN, NJ, NY, PA, and WI

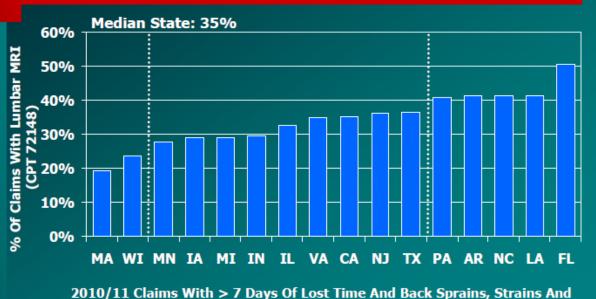
2009p = Preliminary

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NCC

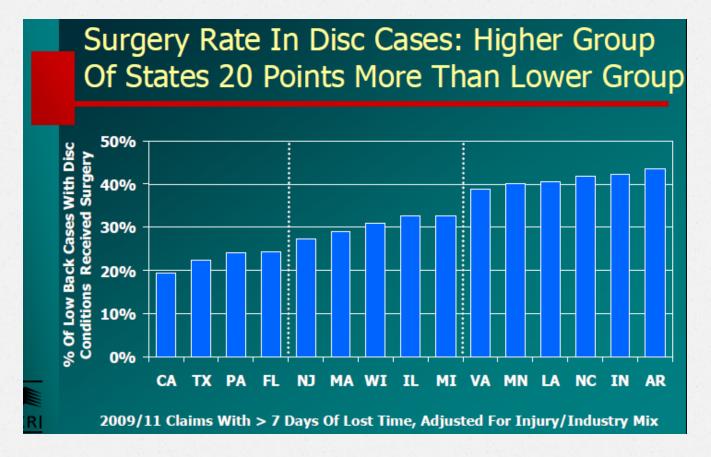
Source: NCCI 2011 State Advisory Forum





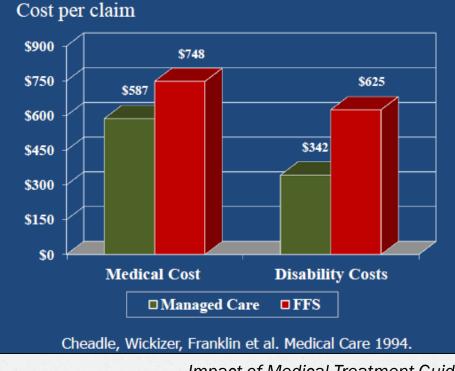
010/11 Claims With > 7 Days Of Lost Time And Back Sprains, Strains And Non-Specific Pain, Adjusted For Injury/Industry Mix

Interstate Variations in Utilization of Workers' Compensation Medical Care
Workers' Compensation Research Institute – February 2013



Interstate Variations in Utilization of Workers' Compensation Medical Care
Workers' Compensation Research Institute – February 2013





Fewer workers went on disability (19% vs 14%) and cost per disabled worker was less.

Data based on 9-month follow up.

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Impact of Medical Treatment Guidelines

Dr. Thomas Wickizer, College of Public Health, Ohio State University
February 2013



Patients treated by COHE physicians who adopted best practices, based on guidelines, achieved better outcomes compared to patients treated by COHE physicians who adopted best practices less often.

Measure	Baseline Year	Outcome Year
	(COHE Patients n = 33,787)	
Disability Days	19.2	12.3*
Disability Costs	\$1,030	\$646*
Medical Costs	\$2,218	\$1,846

Wickizer et al. Medical Care, 2011.

\* P < .01

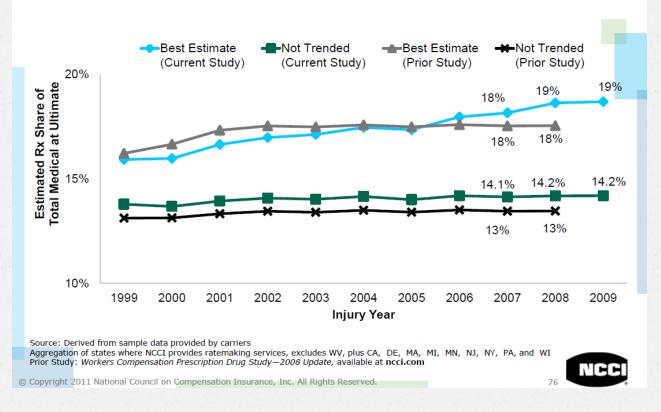
25

Impact of Medical Treatment Guidelines
Study of Eastern Washington Center of Occupational Health & Education (COHE)
Dr. Thomas Wickizer, College of Public Health, Ohio State University
February 2013

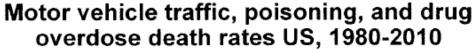
## **Medical Costs**

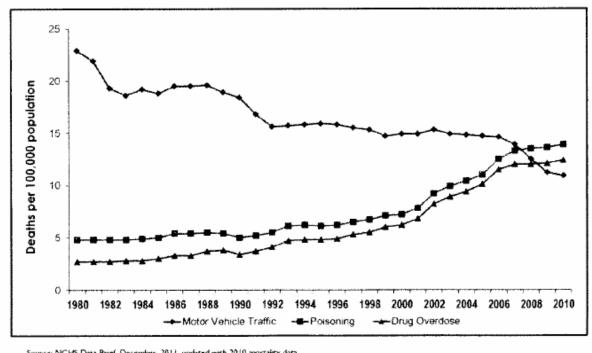
- Prescription Drug Use
  - Use of opioid narcotics
  - Physician Dispensing

# The Indicated Rx Share of Total Medical Is Slightly Elevated From the Last Study



Source: NCCI 2011 State Advisory Forum





Source: NCHS Data Brief, December, 2011, updated with 2010 mortality data.

Opioids: The Problem and the Urgency Dr. Karin Mack, Centers for Disease Control February 2013



NCCI Report on Opioid Use November 2011



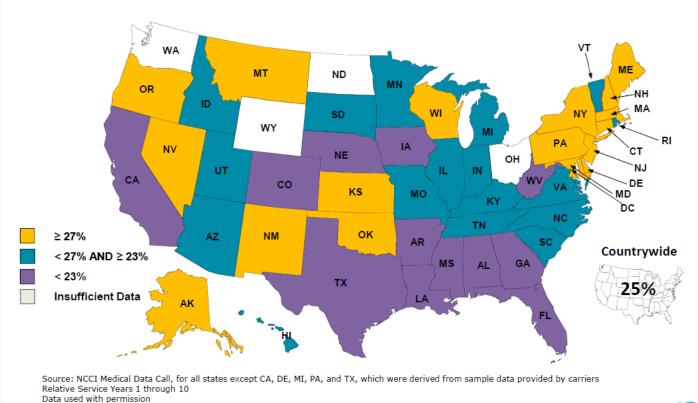


Nonsurgical Claims With > 7 Days Of Lost Time, Injuries From October 2008 To September 2009, Prescriptions Filled Through March 2011

\* Texas Closed Formulary Went Into Effect On September 1, 2011, Which Is Expected To Reduce Use And Longer-Term Use Of Opioids

Opioids in Workers' Compensation
Workers' Compensation Research Institute – February 2013





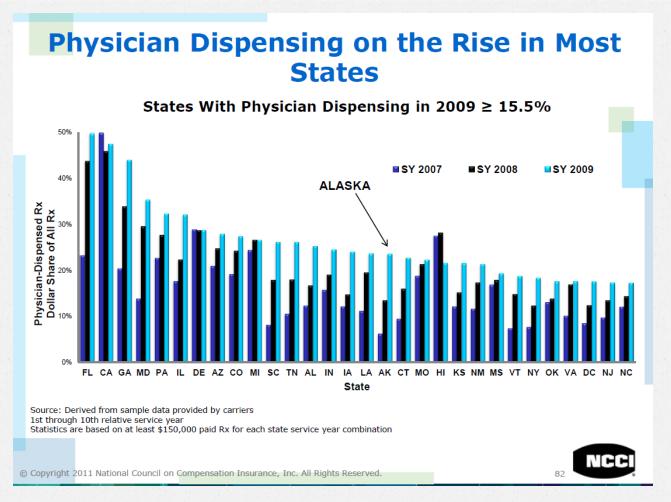
State Legislatures Consider Drug Issues
National Council on Compensation Insurance – August 2013



#### Top Drugs for Service Year 2011 Rank Based on Total Paid

Rank	Drug Name	Brand Name/Generic	Paid Share
1	OXYCONTIN	Brand Name	7.4%
2	LIDODERM	Brand Name	4.9%
3	LYRICA	Brand Name	4.6%
4	GABAPENTIN	Generic	4.0%
5	HYDROCODONE-ACETAMINOPHEN	Generic	3.8%
6	CYMBALTA	Brand Name	3.4%
7	CELEBREX	Brand Name	3.2%
8	MELOXICAM	Generic	2.9%
9	TRAMADOL HCL	Generic	2.5%
10	OPANA ER	Brand Name	2.5%

Workers Compensation Prescription Drug Study NCCI 2013 Annual Issues Symposium – May 2013

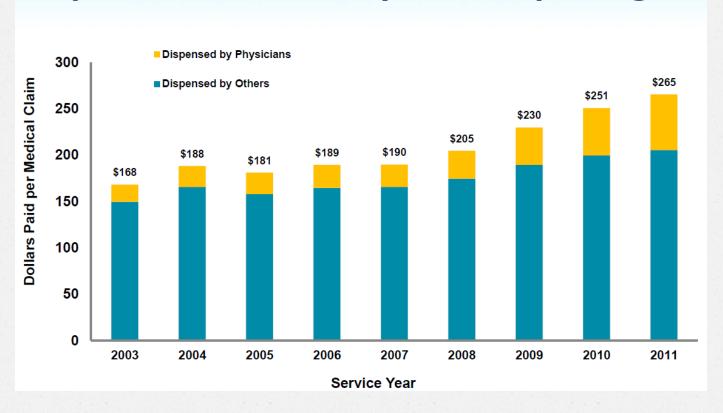


Source: NCCI 2011 State Advisory Forum

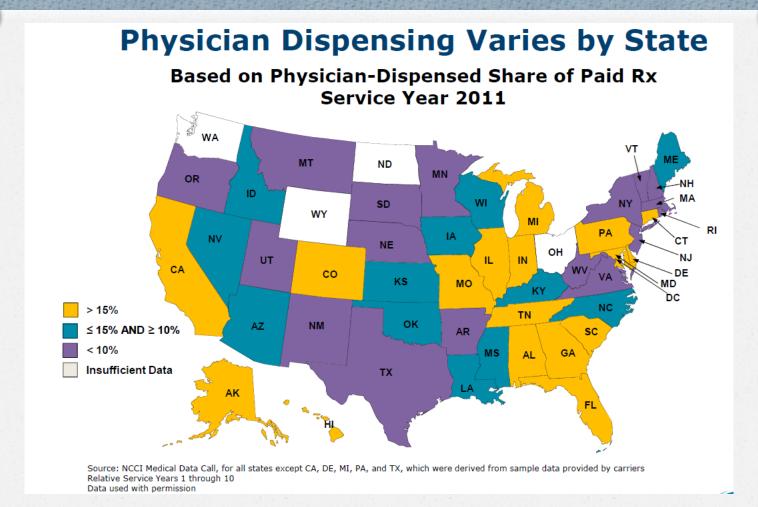




# Most Recent Growth in Prescription Costs per Claim Is From Physician Dispensing



Workers Compensation Prescription Drug Study NCCI 2013 Annual Issues Symposium – May 2013

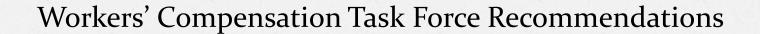


State Legislatures Consider Drug Issues
National Council on Compensation Insurance – August 2013



Best Practice Recommendations

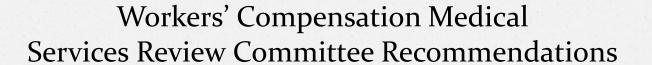
Legislative History



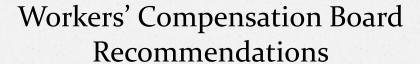
- Discontinue medical fee schedule based on UCR.
- The Legislature work with Administration to improve medical cost data collection.
- Adopt legislation restricting the over-use of opioid narcotics.



- Switch from a UCR based fee schedule to a resource based relative value scale (RBRVS) fee schedule for physicians.
- Implement separate conversion factors for medical practice areas.
- Base hospital fees on MS diagnosis related group (DRG) codes.
- Base fees for ambulatory surgical centers on ambulatory payment classification (APC) rates.



- Implement treatment guidelines.
- Improve data collection on medical costs, including collection of group health cost data.
- Contract with an independent research organization to study the effects of recommended changes.



- Revise fee schedule methodology from UCR to RBRVS for physician, APC for outpatient, and DRG for hospital.
- Revise prescription drug formulary.
- Regulate physician dispensing
- Regulate use of opioid narcotics.

#### Legislative History

- 0 2004
  - Medical fees payable at 90 percentile UCR
- o 2005 SB130
  - Froze medical fees at 2004 fee schedule
  - Sunset 2004 fee schedule effective 12/30/10
  - Established Workers' Compensation Task Force
  - Established Workers' Compensation Medical Services Review Committee
- 2007 HB228
  - Increased 2004 fee schedule by 8.4%
- o 2009 HB104
  - Increased 2004 fee schedule by another 8.9%
- 2011 HB13
  - Establish new medical fee schedule at 90 percentile UCR
- o 2014 HB141 & HB316
  - > Establishes fees for out-of-state treatment
  - Establish new fee schedules by July 1, 2015



# Questions?